

O I P E
AUG 25 2003
P A T E N T & T R A D E M A R K O F F I C E

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Effective on 12/08/2004.

Fee Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	450.00
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Complete if Known

Application Number	10/735,185
Filing Date	12/12/2003
First Named Inventor	Travis Raymond Piehl
Examiner Name	Peter T. Devore
Art Unit	3751
Attorney Docket No.	35624-94959

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order None Other (please identify): _____

 Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION
1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES
Fee Description

Each claim over 20 (including Reissues)

Small Entity

<u>Fee (\$)</u>	<u>Fee (\$)</u>
50	25

Each independent claim over 3 (including Reissues)

Fee (\$)

200	100
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Multiple dependent claims

Fee (\$)

360	180
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Total Claims
Extra Claims
Fee (\$)
Fee Paid (\$)
Multiple Dependent Claims
Indep. Claims
Extra Claims
Fee (\$)
Fee Paid (\$)
Fee (\$)
Fee Paid (\$)

$$\text{HP} = \text{Total Claims} - 20 \text{ or HP} = \text{Indep. Claims} \times \text{Fee ($)} = \text{Fee Paid ($)}$$

HP = highest number of total claims paid for, if greater than 20.

$$\text{HP} = \text{Indep. Claims} - 3 \text{ or HP} = \text{Indep. Claims} \times \text{Fee ($)} = \text{Fee Paid ($)}$$

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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$$- 100 = \text{Total Sheets} / 50 = \text{Extra Sheets} \text{ (round up to a whole number)} \times \text{Fee ($)} = \text{Fee Paid ($)}$$
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Extension Fee for Response Within Second Month

450.00

SUBMITTED BY

Signature	Howard B. Rockman	Registration No. (Attorney/Agent) 22,190	Telephone 312-214-4812
Name (Print/Type)	Howard B. Rockman		Date August 23, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



BARNES & THORNBURG LLP

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Chicago, Illinois 60606
(312) 357-1313

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Customer No.: 23642

Application No.: 10/735,185

Confirmation

No.: 2596

Filing Date: December 12, 2003

Attorney
Docket No.: 35624/94959

First Named
Inventor: Travis Raymond Piehl

Group Art
Unit: 3751

Examiner
Name: Peter T. Devore

Title: PROPORTIONAL
DIRECTIONAL CONTROL
VALVE WITH A MAGNETIC
POSITIONING SENSOR

I hereby certify that this
correspondence is being deposited with the
United States Postal Service as first class
mail in an envelope addressed to:
Commissioner for Patents, P. O. Box 1450,
Alexandria, VA 22313-1450

on August 23, 2005


Barbara J. Dudeck

REQUEST FOR EXTENSION OF TIME

Commissioner of Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Applicant petitions the Commissioner of Patents and Trademarks to extend the time for
response to the Office Action dated March 24, 2005, for two (2) months from June 24, 2005, to

August 24, 2005.

08/26/2005 HTECKLU1.0000005 10735185

01 FC:1252

450.00 OP

As required, the appropriate fee of \$450.00 specified in 37 C.F.R. §1.17 is submitted herewith. Please credit any overpayments or charge any additional fees to the Deposit Account of Barnes & Thornburg LLP, Account No. 12-0913 (36555/95552).

Respectfully submitted,

Howard B. Rockman
Howard B. Rockman
Reg. No. 22,190

Date: August 23, 2005